

NOTIFICATION OF MULTICANDIDATE STATUS

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(See reverse side for instructions)

This form should be filed after the Committee qualifies as a multicandidate committee.

1. (a) NAME OF COMMITTEE IN FULL First State PAC		2. FEC IDENTIFICATION NUMBER C00363648
(b) Number and Street Address PO Box 3008		
(c) City, State and ZIP Code Newport DE 19804	3. TYPE OF COMMITTEE (check one) <input type="checkbox"/> STATE PARTY <input checked="" type="checkbox"/> OTHER	

I certify that **one** of the following situations is correct (complete line 4 or 5):

- 4. STATUS BY AFFILIATION:** The committee submitted its Statement of Organization (FEC FORM 1) on _____ and simultaneously qualified as a multicandidate committee through its affiliation with:

Committee Name: - _____

FEC Identification Number: _____

5. STATUS BY QUALIFICATION:

- (a) candidates:** The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.):

	Name	Office Sought	State/District	Date
(i)	Max Baucus	Senate	MT	01/31/2001
(ii)	Joseph Max Cleland	Senate	GA	05/02/2001
(iii)	Tim Johnson	Senate	SD	06/08/2001
(iv)	Mary Landrieu	Senate	LA	08/24/2001
(v)	Carl Levin	Senate	MI	07/11/2001

- (b) Contributors:** The committee received a contribution from its 51st contributor on: 12/20/2001

- (c) Registration:** The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 11/24/2000

- (d) Qualification:** The committee met the above requirements on: 12/20/2001

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

TYPE OR PRINT NAME OF TREASURER	SIGNATURE OF TREASURER	DATE
Susan Frank Bullock	Electronically Filed by Susan Frank Bullock	01/30/2002

Note: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.